

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>DE</i>	<i>2273</i>	<i>9-9-00</i>
O.I.P.E. CLASSIFIER		<i>17</i>	<i>9/12</i>
FORMALITY REVIEW	<i>RS</i>	<i>01730</i>	<i>12-8-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☒ Rejected N Non-elected
☒ Allowed I Interference
 (Through numeral) Canceled A Appeal
☒ Restricted O Objected

Claim	Date
Final Original	
1	<i>10/15/01</i>
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If more than 150 claims or 10 actions
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TITLE

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